

State of Washington Nurse Application for a Water Right OF ECOLOGY Please follow the attached instructions to avoid unnecessary delays.

For Ecology Use Fee Paid 10,00 Date Majas F

Section	1. APPL	ICANT -	PERSON	i, ORGA	NIZATIO	N, OR W	ATER SY	STEM
Name	lames	C. 5	harpe		Н	ome Tel: (<u>36</u>	0) 194	- 5309
Mailing Add	lress_1872	20 Stat	e Rte. 2	03	V	/ork Tel: (_34	10) 794	- 5457
City Mov	roe	St	ate <u>Wa·</u> Zi	p+4_9827	12_+	FAX: (<u>3</u>	10 , 805	- 0773
	2. CON'I e as above		erson 1	YO CADI	ABOUT	"1110 - API	de coman	ON
			ateZi)	
To the state of th	to approun							
Section	3. STATI	DMIDNT	OF INTE	NT				
The applica	nt requests a	permit to us	se not more t	han	28		_ (gallon	s per minute or
cubic fee	t per second)	from a s	surface water	source or	ground wat	er source (che	ck only one	for the purpose(s)
DESCRIPT	ION OF TI	HE PLACE	OF USE. (S	ee instructi	ons.) NOTE:	A tax parcel	number or a	TACH A "LEGAL" plat number is not
sufficient.	THERE AR	E 3 con	TIGUOUS LOT	s potacin	6 211 Ac	RES - MAD A	16 7x1	plat number is not legel descriptions
Estimate a n	naxımum an	nual quantit	y to be used	in acre-foot	per year:	5	10.700	
☐ Chec	k if the wate	r use is prop	osed for a sh	ort-term pro	ject. Indicate	the period of	time that the	water will be needed
	From		_ to/_	_/				
Section	4. WATER		CF					
oceanon.		ZA GAO GA						
If SURFA	CE WATE	R III			If GROUN	IDWATER		
			cate if stream		A permit i	s desired for		well(s).
	If unnamed I stream," e	•	named sprin	g,"				
								Q. ley S
	of diversions		<i>c</i>		G' 0 1	1 6 11()		5
Source flo	ws into (na	me of body	y of water):		Size & dej	oth of well(s)	40"	
LOCATIO								
Enter the section co	north-south	and east-w	vest distance	es in feet fr	om the poin	of diversion	or withdra	wal to the nearest
section co	THEI.	990 wes	TE 23	10 300 m	of the t	JE Corner	A 256.	
			.					
1/4 of	1/4 of	Section	Township	Range (E/W		unty	If location of so	ource is platted, complete below:
77401	17401	Gection	TOWNSHIP	Kange (E/W	,		Lot Block	
SE Y4	NEX	13	27	GE	Snot	h misH		
2217	, _ , ,	13	9					
rome pure anne.	loo B 5					12 08		
For Ecology U		eceived:		Priori	ty Date:	77 76		
	Not Exempt	FERC Lice		J.		Dept. Of Health #		
Date Accepted	d As Complete	10 10 10	By_		ate Returned		By	WRIA:

ECY 040-1-14 Rev. 7/97 * * f

APPLICATION

Appl. No.: 61 - 27919

Se	ction 5. GENERAL WATER SYSTEM INFORMATION
Α.	Name of system, if named:
В.	Briefly describe your proposed water system. (See instructions.) I have been using this well since 1991 to water ornamental nursery Stock, grown on this site, Heavy use water ornamental nursery Stock, grown on this site, Heavy use
	is usually in the most us of such surg, with luse about one half of that.
	october through March I use very little water. October through March I use very little water. October through March I use very little water. October through March I was I know there was no permit on this October through March I was installed as I know the was no permit on this October through March I use very little water. October through March I use very li
C.	Do you already have any water rights or claims associated with this property or system? PROVIDE DOCUMENTATION.
	ction 6. DOMESTIC/PUBLIC WATER SUPPLY SYSTEM INFORMATION ompleted for all domestic/public supply uses.)
A.	Number of "connections" requested: Type of connection (Homes, Apartment, Recreational, etc.)
B.	Are you within the area of an approved water system? If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.
Coı	mplete C. and D. only if the proposed water system will have fifteen or more connections.
C.	Do you have a current water system plan approved by the Washington State Department of Health? If yes, when was it approved? Please attach the current approved version of your plan.
D.	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved version of your plan.
	ction 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION completed for all irrigation and agriculture uses.)
A.	Total number of acres to be irrigated: 21.02 ±
B.	List total number of acres for other specified agricultural uses:
	Use Acres
	Use Acres Use Acres
C.	Total number of acres to be covered by this application: 21.02 ±
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977) Add up the acreage in which you have a controlling interest, including only: ‡ Acreage irrigated under water rights acquired after December 8, 1977; ‡ Acreage proposed to be irrigated under this application; ‡ Acreage proposed to be irrigated under other pending application(s).
	 Is the combined acreage greater than 2000 acres? Do you have a controlling interest in a Family Farm Development Permit? If yes, enter permit no.:
E.	Farm uses: Stockwater - Total # of animals Animal Type (If dairy cattle, see below) Dairy - # Milking # Non-milking

AA 111	you be using a dam, dike, or other structure to retain or store wat	51 :	LIES MIO
point	E: If you will be storing 10 acre-feet or more of water and/or if the storage will be above grade, you must a voir permit application from the Department of Ecology.		
Sec	ction 9. DRIVING DIRECTIONS		
Provi	ide detailed driving instructions to the project site. From	he intersection of	State Hay 2
	and State Rte 203 head south, ton	vards cornetion, 23	to miles.
	The property is located on the right, west Good Nursery on the South side	There is a Sign.	That Soys
	West loss the Souls Side	of the anoeway,	
Sec	ction 10. REQUIRED MAP		
Α.	Attach a map of the project. (See instructions.)		
	,		
Se	ction 11. PROPERTY OWNERSHIP		
A.	Does the applicant own the land on which the water will be use If no, explain the applicant's interest in the place of use and proof the owner(s):		XYES □ NO
В.	Does the applicant own the land on which the water source is leaf no, submit a copy of agreement:	ocated?	⊠YES □NO
to pr mon	tify that the information above is true and accurate to the best rocess my application, I grant staff from the Department of Editoring purposes. Even though I may have been assisted in the loyees of the Department of Ecology, all responsibility for the	cology access to the site for ins e preparation of the above app	pection and lication by the
	James C. Sharpe licant (or authorized representative)	5/15/98	
Appl	licant (or authorized representative)	Date	
	Same		
Land	downer for place of use (if same as applicant, write "same")	Date	
Duit	20 101 place of all (if builte all application, write builte)		

Section 8. WATER STORAGE

Use this page to continue your answers to any questions on the application. Please indicate section number

before answer.

Ve are returning your application for the fo	ollowing reason(s):	
Examination fee was not enclosed		APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
Section number(s)ncomplete	is/are	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	Andrew Market	
Please provide the additional information		our application by
cology staff	Date_	

Ecology is an Equal Opportunity and Affirmative Action employer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).

Well is located on This piece of property

LOT ONE OF THAT CERTAIN SURVEYS,
RECORDED IN VOLUME 7 OF SURVEYS,
PAGE 239 UNDER ANDITOR'S NO. 7806190131,
SAND SURVEY BENNG A REVISION OF
SURVEY RECORDED UNDER ANDITOR'S NO.
1708310363, BEING A PORTION OF THE SOUTH
HALF OF THE NORTH RAST QUARTER OF
SECTION 13, TOWNSHIP 27 NORTH, RANGE 6
EAST, W.M. SITUATE IN THE COUNTY OF
SNOHMISH, STATE OF WASHINGTON.

LOT TWO AND LOT THREE ARE CONTIGUOUS

PIETES OF PROPRETY AND ARE ALSO USED FOR

BROWING ORNAMIENTAL NURSERY STOCK. WATER

IS PRESENTLY BRING USED ON ALL THREE PARCES.

THEY ARE OF THE SAME RECORDED SURVEY AND

REVISION OF THAT SURVEY, RETORDED IN VOL. T

DF SURVEYS UNDER THE ABOUT AND DITORS NUMBERS.

THEY ALL HAVE THE SAME LEGAL ALEFTER DESCRIPTION

EXCEPT THE LOT NUMBERS ARE DIFFERENT



